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Attorney Docket No.: F118 B

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**APPLICATION NO.:** 10/664,247      **ART UNIT:** 1762

**APPLICANT(S):** Diane K. Stewart, J. David Casey Jr., John Beaty, Christian R. Musil, and Steven Berger

**FILING DATE:** September 17, 2003    **EXAMINER:** N/A

**TITLE:** Photolithography Mask Repair

**INFORMATION DISCLOSURE STATEMENT**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Va 22313-1450

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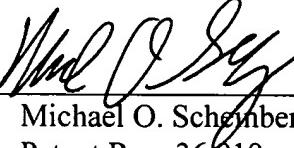
By: Margarita Marquez-Escalona  
Name : Margarita Marquez-Escalona

*Attorney Docket No.: F118 B*

that the information cited in the statement is, or is considered to be, material to patentability as defined in 37 C.F.R. § 1.56(b). This Information Disclosure Statement is being filed before the mailing of a first Office action on the merits.

Respectfully submitted,

Date: 10/18/04

By: 

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PTO/SB/08A (08-03)

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Substitute for form 1449/PTO

## **INFORMATION DISCLOSURE STATEMENT BY APPLICANT**

*(Use as many sheets as necessary)*

Substitute for form 1449/PTO				<b>Complete if Known</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(Use as many sheets as necessary)</i>				Application Number	10/664,247
				Filing Date	09/17/2003
				First Named Inventor	Diane K. Sewart
				Art Unit	1762
				Examiner Name	N/A
Sheet	1	of	1	Attorney Docket Number	F118 B

**U. S. PATENT DOCUMENTS**

## **FOREIGN PATENT DOCUMENTS**

Examiner Signature		Date Considered	
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<sup>1</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>2</sup>Applicant's unique citation designation number (optional). <sup>3</sup>See Kinds Codes of USPTO Patent Documents at [www.uspto.gov](http://www.uspto.gov) or MPEP 901.04. <sup>4</sup>Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). <sup>5</sup>For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. <sup>6</sup>Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST.16 if possible. <sup>7</sup>Applicant is to place a check mark here if English language Translation is attached.

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**TRANSMITTAL  
FORM***(to be used for all correspondence after initial filing)*

		Application Number	10/664,247
		Filing Date	September 17, 2003
		First Named Inventor	Diane K. Stewart
		Art Unit	1762
		Examiner Name	N/A
Total Number of Pages in This Submission		Attorney Docket Number	F118 B

**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):  <input type="checkbox"/> Remarks
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**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Michael O. Scheinberg
Signature	
Date	10/18/04

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Typed or printed name	Margarita Marquez-Escalona
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	Date 10/18/04

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